Objectives

- Understand and articulate the significance of positive patient experience to both reimbursement and patient outcomes
- Assess the barriers to creating a positive patient experience
- Implement and integrate best practices to engage staff and patients in creating positive patient experiences while improving patient outcomes
**Terminology**

- **Centric** = Culture
- **Experience** = Perception
- **Satisfaction** = Happy, Measurement
- **Engagement/Activation** = Understanding, Knowledge

**Satisfaction vs. Experience**

- **Satisfaction**
  - Yes/No
  - Touchy-Feely
  - Observations
  - No complaints

- **Experience**
  - How well you did
  - Knowledge
  - Engaged in care
  - No complaints
Patient Satisfaction ≠ Patient Experience

Patient Experience = Patient Satisfaction + + + Effective Communication
Practical Reasons to Focus on Patient Experience

- Patient Outcomes
- Risk Management
- Efficiencies
- Marketing
- Reimbursement

Measuring Success

Who & How

- Consumer Assessment of Healthcare Providers & Services, CAHPS
- CAHPS Clinician & Group Survey, CG-CAHPS
  - Improve care provided by individual providers, sites of care, medical groups or provider networks
  - Equip consumers with information they can use to choose physicians and other health care providers, physician practices or medical groups

What

- 31 questions produce the following measures of patient experience:
  - Getting Timely Appointments, Care, and Information
  - How Well Providers Communicate With Patients
  - Providers’ Use of Information to Coordinate Patient Care
  - Helpful, Courteous, and Respectful Office Staff
  - Patients’ Rating of the Provider
- May adopt & add supplemental items
The Challenge

The average patient interaction is only 12 minutes

Listen
Document
Understand
Sympathize
Treat
Diagnose
Determine

So, What to Do?

Acknowledge change
Retrain staff
Retrain patients
Get ahead of change
Identify challenges
Enhance teamwork & communication skills
Understand patient experience
Create a culture

Healthcare from the Patient Perspective
Teamwork & Communication are Key

- Team Communication
- Handoffs and sign-outs
- Referrals and consultations
- Between physician/provider and patient
- Discharge, self-care instructions

Ineffective team communication is the root cause for nearly 66% of all medical errors from 1995-2005.

Effective Communication

- Connect to patients
- Engage in the conversation
- Ask the question you want answered
- Listen for the answer
- Reflective listening
- Explain the why & why not
- Two questions
  1. “Do I have what I think I have?”
  2. “Are you going to do what I think you should do?”
How Patients Hear Us

- Tone of Voice: 38%
- Words: 7%
- Body Language: 55%

Mehrabian, Albert

Effective Body Language

- Arms open
- Body orientation, physical barriers
- Lean forward
- Head nodding
- Slow, steady breathing
- Pause before responding
- Eye contact
- Same level
But How Do They Hear Us On the Phone?

TONE OF VOICE

86%

Tone of Voice

- Tells patients who you are
- Makes you different
- Builds trust
- Used to influence and persuade
- Become firmer or deeper, never louder
- Sit up straight
Taking A Call

- Be prepared
- Smile
- Answer promptly – by third or fourth ring maximum
- Answer with name, role and greeting
- Speak slowly and clearly
- No food or gum
- Ask permission for hold – how long
- Notify before transferring
- Get as much info as possible for messages

Placing A Call

- Introduce self
- Rehearse
- Have all information
- Remember the other person may be busier than you
- Help them help you
Communication Techniques

- You sound upset
- Tell me about it
- What would you like me to do
- Here's what I would like to do next
- Agree in principle
- Thank you for sharing your feelings, experience

What Patients Value

<table>
<thead>
<tr>
<th>Item</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Privacy</td>
<td>68.3%</td>
</tr>
<tr>
<td>Verbal communication/recommendations</td>
<td>63.7%</td>
</tr>
<tr>
<td>Eye contact</td>
<td>56.8%</td>
</tr>
<tr>
<td>Handshakes, physical contact</td>
<td>49.6%</td>
</tr>
<tr>
<td>Body positioning near patient</td>
<td>24.9%</td>
</tr>
<tr>
<td>All of the above</td>
<td>22.8%</td>
</tr>
<tr>
<td>None of the above</td>
<td>6.5%</td>
</tr>
</tbody>
</table>
From the Patient Perspective

- 89% Patients cite a good relationship with their primary care physician
- 80% Patients feel engaged
- 40% Patients feel rushed

18-23 Physicians interrupt patients 18-23 seconds into conversation

2 The average patient will talk for 2 minutes if not interrupted

Low Health Literacy Problems & Warnings

- Incomplete forms, missed appointments & noncompliance
- Evaluating information & analyzing treatment options
- Calculating dosages & interpreting test results
- Navigating the system - locating physicians, health information
Low Health Literacy

1/3 of the US population

2/3 of those over 60 years of age

Half walk out of the doctor’s office not knowing what to do

Ask an average of 0-2 questions when meeting with physician

40-80% of medical information is forgotten immediately

50% of retained information is incorrect

37% of patients report they understand

80% of physicians thought the patients understood

Health Literacy & Patient Rights

"It is neither just, nor fair, to expect a patient to make appropriate health decisions and safely manage his/her care without first understanding the information needed to do so."
Combating Low Health Literacy

- Teach back method
- Questions beginning with “how” and “what”
  - “Do you sometimes have difficulty understanding…?”
  - Acknowledge the difficulty
- Plain language, enunciate
- Written materials < 6th grade
- Visit summary
- Alternate teaching methods

Cultural Implications

- Diet, Medicine, Communication, Interaction


A Physician’s Practical Guide to Culturally Competent Care, [https://cccm.thinkculturalhealth.hhs.gov/](https://cccm.thinkculturalhealth.hhs.gov/)
Delivering Bad Information

Setting
Patient perspective
Information
Knowledge
Empathize
Strategize


Courteous, Respect & Professionalism

- Greet the patient, introduce self, address patient by name
- Eye contact
- Connect personally
- Knock on door
- Move away from door, keep hand off doorknob, sit
- Understand every person is unique
- Remember, you are being watched
- Smile
- Ask if there is anything else
Patient Experience Resources

Patient Experience Resources

- Health Resource and Services Administration
- A Physician’s Practical Guide to Culturally Competent Care
  [https://cccm.thinkculturalhealth.hhs.gov/](https://cccm.thinkculturalhealth.hhs.gov/)